



Employee Separation and Exit Checklist

(Issued pursuant to provisions of Section 1089 of the California Unemployment Insurance Code)

Name: Ashley Simmons	EE ID# 702069	SS#
Supervisor: Sydney Mari	Job Title: Assistant Store Manager	
DOH: 09/19/2021	Last Day Worked: 12/29/21	
DOS: 01/03/2022	Ending Pay Rate: \$ 23.00 / hour	
HR Manager Approval [] Yes [] No	Eligible for Rehire: [] Yes [] No	

SEPARATION REASON

☐ Voluntary Termination Effective: _____

[] Resignation [] Job Abandonment [] Other: _____

☒ Involuntary Termination Effective: 1/3/22

[] Work Performance [] Violation of Policy or Procedure [✓] Other: _____

Our company is at-will and has concluded at this time it is not conducive for the business and overall team morale to continue the business relationship therefore ending employment effective immediately, 1/3/22.

☐ Layoff Effective: _____

EE Email Address: _____ Contact Number: (____) _____

EXIT CHECKLIST

DISCUSSED WITH THE EMPLOYEE:

	Yes	No	Not Applicable
• Receipt of Acknowledgement of Final Paycheck	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Severance Agreement	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Benefits/COBRA General Notice	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Expense Reports/Other Reimbursements	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Resignation Letter Received	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Other 2 wks additional of pay	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ITEMS TO BE RETURNED BY EMPLOYEE PRIOR TO ISSUING FINAL PAYCHECK

	Returned	Not Applicable
• Key(s) - Building/Office/File Cabinets/Safe	<input type="checkbox"/>	<input type="checkbox"/>
• Laptop	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Cell Phone	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Air-Card/Hot-Spot	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Employee ID Badge	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• AMEX Card	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Parking Transponder	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Other _____	<input type="checkbox"/>	<input type="checkbox"/>

*Check state law for restrictions before holding paycheck beyond date of termination.

Notice Acknowledgement / Reconocimiento de Aviso

☒ I received a copy of this notice on 1/3/22

☐ Employee unavailable for signature; copy mailed on _____

☐ Employee refused to sign: Manager Signature: _____ Print Name of Manager: _____

Employee Signature

Date

HR Manager 213-488-4279 Date: 1/3/22